Good afternoon, Senator Formica, Senator Osten, Representative Walker, Vice Chairs and Members of the Appropriations Committee, and thank you for this opportunity to speak on the Governor's proposed budget cuts to the Department of Mental Health & Addiction Services, or DMHAS. I am here today to ask that you protect the services provided through DMHAS, and in particular Connecticut's 5 statemandated Regional Mental Health Boards—which were once again singled out for effective elimination.

My name is Vered Brandman, and as my shirt says, I'm what "CRAZY" looks like—I'm Rocking Recovery. I am a resident of Norwalk, where I have lived for the past 15 years, and I am a recipient of mental health services and an active voter. I'm also a co-founder of an organization centering the voices and insights of people with lived experience of mental health & addiction challenges, a Board Member for my Regional Mental Health Board (Southwest Regional Mental Health Board), a member of Keep the Promise Coalition (also called KTP), a member of the Connecticut Cross Disability Lifespan Alliance, and a Certified Recovery Support Specialist or Peer Support Specialist. I bring a lot to the table when I sit in on Catchment Area Council meetings, which operate under the guidance of my Regional Mental Health Board. Those Catchment Area Councils are a place where I, as a service recipient and person in recovery from mental health issues, can count on being considered an equal alongside psychiatrists, social workers, program managers, and town appointees. At the Catchment Area Councils, and on the Board of Directors where I have served since September 2015 and as staff which is where my involvement with the Regional Mental Health Board started, we all work collaboratively to identify and address local and regional-level needs around mental health, addiction, and recovery. We have players from agencies throughout the region, from service provider sites, club houses, agencies serving intersecting needs like housing and homelessness, the LQBTQ population, and more. Key stakeholders from every entry point and every perspective, including people learning about mental health for the first time.

As a person in recovery, I can't overemphasis the role the Regional Mental Health Boards and Catchment Area Councils have played in my recovery, and in my pursuit of meaningful work and gainful employment in my chosen field.

So I take it very personally when the Regional Mental Health Boards are singled out for "cuts and consolidation" at a price tag that effectively eliminate those 5 organizations and the 13 Regional Action Councils. The budget our Governor proposes to leave for the "consolidated" single entity that would replace these 18 organizations is less than a tenth of their current combined funding. These organizations operate with minimal staff and the support of hundreds of volunteers who partner with us

because our state mandate and state funding provide the legitimacy and impartiality we need in order to foster trust from so many private and public sector agencies, advocacy groups, and private citizens. Much of the work we accomplish through the RMHBs is based in volunteered hours, but to get that level of support from so many agencies, we need our state funding to support the staff who pull it all together.

I've attached a document outlining the value of the Regional Mental Health Boards, and the huge gap that we would have if they were to be eliminated, as will happen if these proposed "cuts and consolidation" are approved. Just in this past year, the Southwest Regional Mental Health Board conducted research into waits for an intake with a psychiatrist, in response to an outcry from community members; I've attached the report from that research, and I would like to thank Representative Cristin McCarthy-Vahey for putting forward HB 6483 to address the impending shortage in psychiatric prescribers. This bill, which would establish a task force, is the direct result of the community collaboration that the Regional Mental Health Boards foster. The impending shortage will affect all of Connecticut, and psychiatrists and associations throughout the state submitted testimony in favor of the bill. All of that is a result of the Catchment Area Councils and the Regional Mental Health Boards that oversee them. If not for them, when and how would we have started looking for solutions to this one specific problem of shortage in psychiatrists?

The Regional Mental Health Boards also provide Resource Guides, listing private and public-sector mental health and addiction service providers, advocacy organizations, shelters, and other resources for the many intersecting needs. These guides are updated annually, again through the collaborative efforts of Catchment Area Council members representing agencies, non-profits, and other groups in our state. I cannot count the number of times I have gone to those resource guides to find the name and contact information for a service a friend could benefit from. My friends know is as "The Mental Health Person," which means they reach out to me for support navigating what's out there. The resource guides the Regional Mental Health Boards "curate" are an invaluable tool to help me be a better resource to my personal, and professional, network.

In closing, I ask that you please protect our state's 5 Regional Mental Health Boards and 13 Regional Action Councils. They do so much with so little, and so much of what we as communities are able to do

collaboratively hinges on the state funding that staffs and legitimizes these important watchdog organizations.

Thank you for your consideration.